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PTO/SB/87 (08-00)
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RE: Application No. 10/799,423 Filing Date: 03/12/2004

Atty. Docket No.: 403118-A-01-US (Burritt)

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FOLLOWING PAPERS ARE INCLUDED IN THIS TRANSMISSION

1. Fee Transmittal form PTO/SB/17 - 1 page
2. Transmittal form PTO/SB/21 - 1 page
3. Response/Amendment - 26 pages

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PTO/SB/21 (09-04)

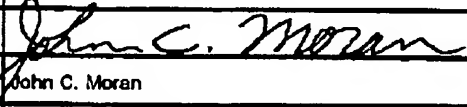
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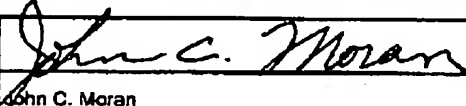
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/798,423	
	Filing Date	03/12/2004	
	First Named Inventor	David Ray Burnitt	
	Art Unit	2628	
	Examiner Name	Woods, Eric V.	
Total Number of Pages in This Submission	28	Attorney Docket Number	403118-A-01-US (Burnitt)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	John C. Moran, Attorney, P.C.		
Signature			
Printed name	John C. Moran		
Date	01/23/2007	Reg. No.	30782

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	John C. Moran
Date	01/23/2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-04v2)

Approved for use through 07/31/2008. OMB 0851-0032
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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0

Complete if Known

Application Number 10/799,423
Filing Date 03/12/2004
First Named Inventor David Ray Burritt
Examiner Name Woods, Eric V.
Art Unit 2628
Attorney Docket No. 403118-A-01-US (Burritt)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number 501602
Deposit Account Name

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extn. Claims	Fee from below	Fee Paid
Independent	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 44	Independent claims in excess of 3
1203 300	2203 150	Multiple dependent claim, if not paid
1204 88	2204 44	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65		Surcharge - late filing fee or oath	
1052 50	2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 65		Non-English specification	
1812 2,520	2812 2,520		For filing a request for ex parte reexamination	
1804 920*	2804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*	2805 1,840*		Requesting publication of SIR after Examiner action	
1251 110	2251 55		Extension for reply within first month	
1252 430	2252 215		Extension for reply within second month	
1253 980	2253 490		Extension for reply within third month	
1254 1,530	2254 765		Extension for reply within fourth month	
1255 2,080	2255 1,040		Extension for reply within fifth month	
1401 340	2401 170		Notice of Appeal	
1402 340	2402 170		Filing a brief in support of an appeal	
1403 300	2403 150		Request for oral hearing	
1451 1,510	2451 1,510		Petition to institute a public use proceeding	
1452 110	2452 55		Petition to revive - unavoidable	
1453 1,370	2453 685		Petition to revive - unintentional	
1501 1,370	2501 685		Utility issue fee (or reissue)	
1502 490	2502 245		Design issue fee	
1803 650	2803 330		Plant issue fee	
1460 130	2460 65		Petitions to the Commissioner	
1807 50	2807 25		Processing fee under 37 CFR 1.17(g)	
1809 180	2809 90		Submission of Information Disclosure Stmt	
8021 40	28021 20		Recording each patent assignment per property (times number of properties)	
1809 790	2809 395		Filing a submission after final rejection (37 CFR 1.129(a))	
1810 790	2810 395		For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395		Request for Continued Examination (RCE)	
1802 900	2802 450		Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0

SUBMITTER BY

Name (Print/Type) John C. Moran

Registration No. 30782

(Complete if applicable)

Telephone 303-450-9928

Signature

Date

01/23/2007

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Serial No. 10/799,423

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IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Patent Application

Inventors David Ray Burritt
Cynthia Hiatt
Paul Roller Michaelis
Chacko Thomas

Atty. Docket No. 403118-A-US (Burritt)

Serial No. 10/799,423 Group Art Unit 2628

Filing Date 03/12/2004

Examiner Woods, Eric V.

Title Apparatus and Method for Providing Visual
Telecommunication Terminal Status Information

COMMISSIONER FOR PATENTS
Alexandria, VA 22313-1450

SIR:

AMENDMENT

In response to the Office Action of 10/24/2006, please
amend the above-identified application as follows:

I hereby certify that this correspondence is being facsimile transmitted to Commissioner for Patents, at fax No. 571-273-8300, on	
<u>01/23/2007</u> Date Being Mailed or Faxed	<u>John C. Moran</u> Signature